BEST AVAILABLE COPY

PATENT	APPLICATION	FEE DETERMINA	TION RECORE
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Effective October 1, 2000

Application	or	Docket	Number
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09817085

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS		79				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			79 min	79 minus 20= * 5		29		X\$ 9=	531	OR	X\$18=	
IND	EPENDENT CL	AIMS	y mir	nus 3 = * 5		Į	X40=	200	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	I	TOTAL	1086	OR	TOTAL	
	CI	LAIMS AS A	MENDED	- PAR	T II			186		ı ~''	OTHER	THAN
		(Column 1)		(Colu	mn 2)	(Column 3)	ا	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	· · · · · · · · · · · · · · · · · · ·	PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ.	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			+135=	-	OR	+270=	
								TOTAL			TOTAL	
		(Column 4)		(Cale	mn 2)	(Column 3)	•	ADDIT. FEE		JON.	ADDIT. FEE	
T B		(Column 1) CLAIMS REMAINING AFTER		HIGI NUN	HEST MBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
MEN		AMENDMENT			FOR	LAIRA	 		FEE			FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AU	<u> </u> =		X40=		OR	X80=	
	THOI PHESE	NTATION OF M	OLITE DE	CINDEN	I CLAIM		ı	+135=		OR	+270=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. FEE		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	, , , , , , , , , , , , , , , , , , , ,	HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM]					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE **OR ADDIT. FEE												